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APPLICANTS

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OK

** CONTINUING DATA *****

This application is a CIP of 08/813,438 03/10/1997 ABN
 which is a CIP of 08/747,340 11/12/1996 PAT 5,738,937

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 12/08/1997

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY ME	SHEETS DRAWING 11	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
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ADDRESS

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TITLE

WATERPROOF/BREATHABLE MOISTURE TRANSFER LINER INCLUDING A THREE PART COMPOSITE CAPABLE
 OF WICKING MOISTURE AWAY FROM AN INDIVIDUAL'S BODY AND CAPABLE OF REGULATING TEMPERATURE

FILING FEE RECEIVED 847	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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